

108TH CONGRESS
1ST SESSION

S. 853

To amend title XVIII of the Social Security Act to eliminate discriminatory copayment rates for outpatient psychiatric services under the medicare program.

IN THE SENATE OF THE UNITED STATES

APRIL 10, 2003

Ms. SNOWE (for herself and Mr. KERRY) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to eliminate discriminatory copayment rates for outpatient psychiatric services under the medicare program.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Medicare Mental
5 Health Copayment Equity Act of 2003”.

1 **SEC. 2. ELIMINATION OF DISCRIMINATORY COPAYMENT**
 2 **RATES FOR MEDICARE OUTPATIENT PSY-**
 3 **CHIATRIC SERVICES.**

4 Section 1833(c) of the Social Security Act (42 U.S.C.
 5 1395l(c)) is amended to read as follows:

6 “(c)(1) Notwithstanding any other provision of this
 7 part, with respect to expenses incurred in a calendar year
 8 in connection with the treatment of mental, psycho-
 9 neurotic, and personality disorders of an individual who
 10 is not an inpatient of a hospital at the time such expenses
 11 are incurred, there shall be considered as incurred ex-
 12 penses for purposes of subsections (a) and (b)—

13 “(A) for expenses incurred in any year before
 14 2004, only 62½ percent of such expenses;

15 “(B) for expenses incurred in 2004, only 68¾
 16 percent of such expenses;

17 “(C) for expenses incurred in 2005, only 75
 18 percent of such expenses;

19 “(D) for expenses incurred in 2006, only 81¼
 20 percent of such expenses;

21 “(E) for expenses incurred in 2007, only 87½
 22 percent of such expenses;

23 “(F) for expenses incurred in 2008, only 93¾
 24 percent of such expenses; and

25 “(G) for expenses incurred in 2009 or any sub-
 26 sequent year, 100 percent of such expenses.

1 “(2) For purposes of this subsection, the term ‘treat-
2 ment’ does not include brief office visits (as defined by
3 the Secretary) for the sole purpose of monitoring or
4 changing drug prescriptions used in the treatment of such
5 disorders or partial hospitalization services that are not
6 directly provided by a physician.”.

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